SENDER: COMPLETE THIS SECTION DOCUM

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.
- 1. Article Addressed to:

Curey Bennett 24 CR 99 Ext Tishomingo, MS 38873



2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERIGE 1:0

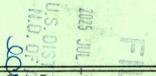
A. Signature 2025 Jul-01 AM 11:36

V.S. DISTRICT CONTROL

N.D. OF A LABRAMA

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No



3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery
☐ Certified Mail®

☐ Certified Mail Restricted Delivery
☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail Restricted Delivery
(over \$500)

☐ Priority Mail Express®
☐ Registered Mail[™]
☐ Registered Mail Restricted

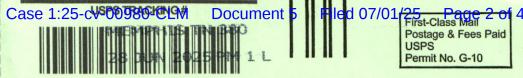
Delivery

Return Receipt for
Merchandise

☐ Signature Confirmation™

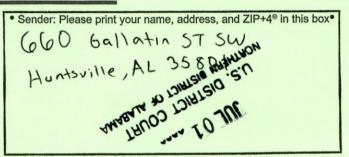
☐ Signature Confirmation Restricted Delivery

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United States Postal Service



 ${\bf H}_{111}, {\bf H}_{121}, {\bf H}_{121}, {\bf H}_{121}, {\bf H}_{111}, {\bf$

DOCUM & TOOMPLETE THIS SECTION CADELIVERSO SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.
- 1. Article Addressed to:

Vickie Bennett 22 County Road 95 Tishomingo, MS 38873



2. Article Number (Transfer from service label)

A. Signature

B. Received by (Printed Name)

D. Is delivery address different from item 1?

If YES, enter delivery address below:

Agent Addressee C. Vate of Delivery

No

Service Type

(over \$500)

☐ Adult Signature ☐ Adult Signature Restricted Delivery

☐ Certified Mail® ☐ Certified Mail Restricted Delivery

☐ Insured Mail Restricted Delivery

☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail

☐ Priority Mail Express®

□ Registered Mail™ □ Registered Mail Restricted

Delivery ☐ Return Receipt for

Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation

Restricted Delivery Domestic Return Receipt

PS Form 3811, July 2015 PSN 7530-02-000-9053



9590 9402 5843 0038 4586 75

United States

Postal Service

 Sender: Please print your name, address, and ZIP+4® in this box UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA

Official Business 0 M

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